

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M G		3/1/00
O.I.P.E. CLASSIFIER			3/1/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		69300	

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	1/10/00
2	1/10/00
3	1/10/00
4	1/10/00
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10	1/10/00
11	✓ ✓ ✓ ✓ ✓
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19	✓ ✓ ✓ ✓
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27	✓ ✓ ✓ ✓
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42	✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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TITLE

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